

PART B - FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s), to: **Mail** Box ISSUE FEE
 Commissioner for Patents
 Alexandria, VA 22313-1450
Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

10/27/2005

Note: The certificate of mailing below can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

B. Gail Ballard	(Depositor's name)
<i>B. Gail Ballard</i>	(Signature)
January 23, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMES INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/788,439	02/20/2001	John T. Foreman	5040-06323/EBM	5226

TITLE OF INVENTION: METHOD OF ENTERING PRESCRIPTION INFORMATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	01/27/2006
EXAMINER	ART UNIT	CLASS-SUBCLASS			
VARGOT, MATHIEU D	1732	264-001360			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SM/47) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 MEYERTONS, HOOD, KIVLIN,
KOWERT & GOETZEL, P.C.

2 Eric B. Meyertons

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE:

(B) RESIDENCE (CITY & STATE OR COUNTRY):

Q2100, Inc.

Louisville, KY

Please check the appropriate assignee category indicated below (will not be printed on the patent): ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee
☒ Advance Order - # of Copies 5

4b. Payment of Fee(s)::

- ☒ A fee authorization in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Commissioner is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1505/5040-06323/EBM* (enclose an extra copy of this form).

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Eric B. Meyertons
 Reg. No. 34,876

1-23-06

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

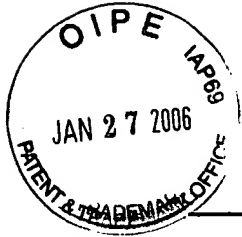
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 C.F.R. 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount to time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, VA 22313. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, VA 22313.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

01/30/2006 HXNED2 00000074 501505 09/788439

01 FEE:301	700.00 DA
02 FEE:1504	300.00 DA
03 FEE:8001	15.00 DA

TRANSMIT THIS FORM WITH FEE(S)



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 09/788,439

Confirmation No.: 5226

Filed: February 20, 2001

Inventor(s):

Foreman et al.

Title:

GRAPHICAL INTERFACE
FOR MONITORING
USAGE OF
COMPONENTS OF A
LENS FORMING
APPARATUS

§ Examiner: Vargot, Mathieu D
§ Art Unit: 1732
§ Atty. Dkt. No: 5040-06323
§
§
§
§
§
§
§
§
§

<p>CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8</p> <p>DATE OF DEPOSIT: <i>January 23, 2006</i></p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail on the date indicated above and is addressed to:</p> <p>Commissioner for Patents Alexandria, VA 22313-1450</p> <p><i>B. Gail Ballard</i> B. Gail Ballard</p>

FEE AUTHORIZATION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

The Commissioner is hereby authorized to charge the following fees to Meyertons, Hood, Kivlin, Kowert & Goetzel, P.C. Deposit Account Number 50-1505/5040-06323:

\$700.00 – Issue Fee;
\$300.00 – Publication Fee; and
\$ 15.00 - Five copies

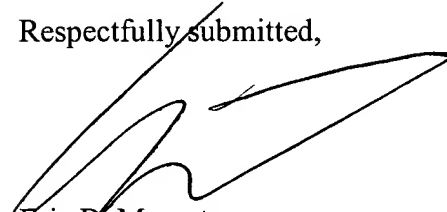
Total Amount: \$1015.00

Attorney Docket No.: 5040-06323

Foreman et al.
09/788,439

The Commissioner is also authorized to charge any extension fee or other fees which may be necessary to the same account number.

Respectfully submitted,



Eric B. Meyertons
Reg. No. 34,876

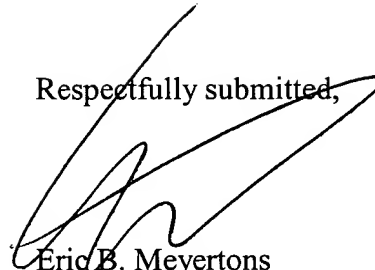
Attorney for Applicant

MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C.
P.O. BOX 398
AUSTIN, TX 78767-0398
(512) 853-8800 (voice)
(512) 853-8801 (facsimile)

Date: January 23, 2006

Foreman et al.
09/788,439

Respectfully submitted,



Eric B. Meyertons
Reg. No. 34,876

Attorney for Applicant

MEYERTONS, HOOD, KIVLIN, KOWERT & GOETZEL, P.C.
P.O. BOX 398
AUSTIN, TX 78767-0398
(512) 853-8800 (voice)
(512) 853-8801 (facsimile)

Date: January 23, 2006